

# CLAIMS ONLY

SERIAL NO. *09676782* FILING DATE

APPLICANT(S)

## CLAIMS

|              | AS FILED |      | AFTER<br>1st AMENDMENT |      | AFTER<br>2nd AMENDMENT |      |
|--------------|----------|------|------------------------|------|------------------------|------|
|              | IND.     | DEP. | IND.                   | DEP. | IND.                   | DEP. |
| 1            | /        |      |                        |      |                        |      |
| 2            | /        |      |                        |      |                        |      |
| 3            | /        |      |                        |      |                        |      |
| 4            | /        |      |                        |      |                        |      |
| 5            | /        |      |                        |      |                        |      |
| 6            | /        |      |                        |      |                        |      |
| 7            | /        |      |                        |      |                        |      |
| 8            | /        |      |                        |      |                        |      |
| 9            | /        |      |                        |      |                        |      |
| 10           | /        |      |                        |      |                        |      |
| 11           | /        |      |                        |      |                        |      |
| 12           | /        |      |                        |      |                        |      |
| 13           | /        |      |                        |      |                        |      |
| 14           | /        |      |                        |      |                        |      |
| 15           | /        |      |                        |      |                        |      |
| 16           | /        |      |                        |      |                        |      |
| 17           | /        |      |                        |      |                        |      |
| 18           | /        |      |                        |      |                        |      |
| 19           | /        |      |                        |      |                        |      |
| 20           | /        |      |                        |      |                        |      |
| 21           | /        |      |                        |      |                        |      |
| 22           | /        |      |                        |      |                        |      |
| 23           | /        |      |                        |      |                        |      |
| 24           | /        |      |                        |      |                        |      |
| 25           | /        |      |                        |      |                        |      |
| 26           | /        |      |                        |      |                        |      |
| 27           | /        |      |                        |      |                        |      |
| 28           | /        |      |                        |      |                        |      |
| 29           | /        |      |                        |      |                        |      |
| 30           | /        |      |                        |      |                        |      |
| 31           | /        |      |                        |      |                        |      |
| 32           | /        |      |                        |      |                        |      |
| 33           | /        |      |                        |      |                        |      |
| 34           | /        |      |                        |      |                        |      |
| 35           | /        |      |                        |      |                        |      |
| 36           | /        |      |                        |      |                        |      |
| 37           | /        |      |                        |      |                        |      |
| 38           | /        |      |                        |      |                        |      |
| 39           | /        |      |                        |      |                        |      |
| 40           | /        |      |                        |      |                        |      |
| 41           | /        |      |                        |      |                        |      |
| 42           | /        |      |                        |      |                        |      |
| 43           | /        |      |                        |      |                        |      |
| 44           | /        |      |                        |      |                        |      |
| 45           | /        |      |                        |      |                        |      |
| 46           | /        |      |                        |      |                        |      |
| 47           | /        |      |                        |      |                        |      |
| 48           | /        |      |                        |      |                        |      |
| 49           | /        |      |                        |      |                        |      |
| 50           |          |      |                        |      |                        |      |
| TOTAL IND.   | 3        |      |                        |      |                        |      |
| TOTAL DEP.   | 46       |      |                        |      |                        |      |
| TOTAL CLAIMS | 49       |      |                        |      |                        |      |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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